

The EMS Education Post Transition Workgroup met on October 27, 2015.

1. Mary Zapp, Holly HJ, Brett Rima, Joanne Ewen, Tia Radant, Erin Glover, Steve Hagstrom, Cathy Anderson, Heather Grinnsteiner, Kelly Wanzek, Brad Wright, Ken Klatt, Pat Lee, Eric Weller, Serena Totzke-Johnson, Lynda Goerisch.
2. Review of Agenda & Notes
3. Work Group Charge and Mission Statement reviewed – recommendations will be presented to the Executive Committee this week.
4. Work Group Charge 1 and 2
  - a. Clarify bullet 3 in regards to LCCR that the State can determine what that component is depending on what is going on in the State.
  - b. Clarification of the NCCP Skills Component – Eric Weller
    - i. The NREMT comes out with a document that shows how skills are evaluated. How will the skill component fit into this? Mary “quick glance” felt there was a lot of leeway for the Medical Director or
    - ii. The approved agent and exam staff will not go away due to the initial requirements. Possibility of a bank of resources.
    - iii. EMR and EMT – left to the Education Program or Training Officer
    - iv. AEMT and Paramedic – left to Medical Director
    - v. Ambulance services have the MD requirement for annual skills verification – however those working outside ambulance services do not have that component. Active NREMT members have an affiliation for skills check off, inactive members do not.
    - vi. The REGULATORY PIECE
      1. NCCR – recommendation be taught by MN approved EP. The onus is on the EP to verify skills competency based on NCCP guidelines.
      2. LCCR – records are on the individual or
      3. Should we be requiring NREMT.
      4. Tracking component left to the Board.
    - vii. Skills verified and laid out very clearly in NCCR guidelines.
  - c. MARK KING Initiative – allows those who have lapsed NREMT to obtain NREMT certification without having to take the exam again....
    - i. Do we offer or don’t we offer?
    - ii. If you choose to obtain through MK, then you must maintain the certification. IF you choose to lapse again, you must go through the testing process again (NREMT Re-Entry process). This would be a State initiative.
    - iii. Individuals can choose to re-obtain NREMT with MK if they choose or not to.
    - iv. North Dakota applied this and has a sunset date.
      1. Those who chose to obtain NREMT – they have to maintain in ND.
      2. Those who chose not to obtain NREMT – sunset, basically upon death.
    - v. The group felt this was a Win-Win for all, however there is a fee to obtain the NREMT back through MK.
      1. This could be looked at an unfunded mandate.

2. Serena “what is the push?” To me this says you have to maintain NREMT.
3. Holly example
4. Downside – Willoughby, is if new EMT’s are required to maintain, then we are requiring NREMT forever.
5. Mark King would be a two year recertification period mm/dd/yy would have to partake in the MK Initiative or state certification only would sunset by a particular date – similar to what ND did
- vi. Tia – what value does the NREMT status have if we are currently are requiring NREMT education
- vii. In states that have adopted MK, how many took advantage of it.
  1. In ND this has increased volunteerism, because the 1<sup>st</sup> recertification at the NREMT requires affiliation with an ambulance service.
  2. FEMA is really pushing this and grant funding may also be available in the future.
  3. It can benefit our patients, it can reassure the quality of what we are doing. – Kelly
  4. Mary – we already require NREMT when you come into the state but there are other programs, not only FEMA programs, but state compacts, etc that allow for reciprocity to other states in Wild Fires, Disasters, etc.
  5. Eric – in my mind the advantage of the Mark King is that you can get your NREMT,
  6. Why do states do it? Phone call Tia received – there is a risk to the public if the EMSRB is burdened.
    - a. Mary – state doesn’t have the resources to audit EP’s
    - b. We are the only Board in the State that doesn’t charge for the certification.
  7. ND made a statement “WE are going to be a NREMT state by 2045. If you vision yourself as providing care in the capacity of an EMT.
  8. Wright – Why don’t we entertain the notion of a longer sunset date. If it goes along the lines of “unfunded mandate”.
    - a. It doesn’t seem there would be push back in offering the MKI. The push back may come in requirement of National Certification. (versus specifically naming NREMT).
    - b. What does the NREMT offer the individual?
      - i. Held to National Standard
      - ii. Been through a vetted process
      - iii. Reciprocity to other states
9. LUNCH
10. Workgroup Charge 3 – Licensure vs. Certification
  - a. Certification and Licensure defined by Mary and NAEMT statement handed out.

- i. One of the issues the EMSRB runs into is “well I have my NREMT why do I need my State?” because they are both certifications.
- ii. Does this bring a level of professionalism in the state? Might this clear up some items for practitioners. This is like all other Board – you get a license.
- iii. Tony needs to explore how this impacts our agency.
- iv. **Recommend to the Board to explore risks and benefits of Licensure vs Certification in MN of EMS Providers. – (Radant, Grinstein) - MCU**

11. Hagstrom – more and more entities are pushing for National Certification.

- a. Lee – Education will need to be provided throughout the State to put out fires of rumors.
- b. Hammann-Jacobs – support comes from within this work group.

12. Motion by Wright

- a. **Adopt the MKI, adopt implementation to National Certification by April 1, 2030 at which time all EMS personnel (EMT’s, AEMT’s, and Paramedics) in MN must have and maintain National Certification.**

- i. This gives all services and individuals the appropriate time frame and opportunity to determine if this is a viable option for them. It is far reaching and easily sellable

- b. **Beginning April 1, 2016 and thereafter all National Certified EMS Providers in MN (EMT, AEMT, and Paramedics) shall maintain National Certification going forward. Wright, Ewen**

- c. Serena – not sure National Registry is the way to go. I don’t feel the mandating it is going to make better providers.
- d. Fire and Police went to licensure and we are not professionals in this State because, we are still in adolescence vs. being professionals.
- e. Vote on Motion 1 – Weller, Totzke-Johnson, Willoughby-MC
- f. Vote on Motion 2 – Weller, Totzke-Johnson, Willoughby – MC

13. Discussion, if Motion #4 on 10/8/2015 were not adopted by the Board by April 1, 2016, then all other motions, other than #1 on 10/8/15 would need to be revisited. (They are tied together).

- a. **This group would recommend the State use the NCCP model regardless of whether the NREMT designates the State of MN as an NCCP state or not after March 31, 2016. Motion by Radant, Willoughby – MCU**

14. Next Meeting

- a. Mary will send Statutory Language that covers EMR, EMR Education and Regulation.